

**MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET**

SERIAL NO. 10617596

FILING DATE 3

APPLICANT(S)

CLAIMS

AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT							
IND	DEP	IND	DEP	IND	DEP						
1						51					
2						52					
3						53					
4						54					
5						55					
6						56					
7						57					
8						58					
9						59					
10						60					
11						61					
12						62					
13						63					
14						64					
15						65					
16						66					
17						67					
18						68					
19						69					
20						70					
21						71					
22						72					
23						73					
24						74					
25						75					
26						76					
27						77					
28						78					
29	/					79					
30	/	/				80					
31	/	/				81					
32	/	/				82					
33	/	/				83					
34	/	/				84					
35	/	/				85					
36	/	/				86					
37	/	/				87					
38	/	/				88					
39	/	/				89					
40	/	/				90					
41						91					
42						92					
43						93					
44						94					
45						95					
46						96					
47						97					
48						98					
49						99					
50						100					
TOTAL IND.	6					TOTAL IND.					
TOTAL DEP.	12					TOTAL DEP.					
TOTAL CLAIMS						TOTAL CLAIMS					